

TEKNO METAL KAPLAMA SANAYI VE TICARET ANONİM ŞİRKETİ

APPLICATION FORM FOR EXERCISING A DATA SUBJECT'S RIGHTS IN ACCORDANCE WITH THE PERSONAL DATA PROTECTION LAW NO. 6698

We, Tekno Metal Kaplama Sanayi Ve Ticaret Anonim Şirketi ("Tekno Metal" and/or "Company") prepared this application form so you, Data Subject that is a real person of whom personal data is processed, can exercise your rights under Article 11 of Personal Data Protection Law in accordance with the Communiqué on Procedures and Principles of Application to Data Subject.

You can send application form in writing with wet signature to the Company's head office address or by using the registered electronic mail (KEP) address, secure electronic signature, mobile signature or by using the e-mail address previously reported to Tekno Metal and registered in the Company's system.

We will respond to your application as soon as possible from the date of receipt to us and in any case, latest within 30 days. If the information and documents you provide are missing or incomprehensible, we will contact you to clarify your application.

1. IDENTIFICATION AND CONTACT INFORMATION OF THE RELEVANT PERSON (OR IF ANY, REPRESENTATIVE THEREOF)

Name - Surname:	
Representative's Name-Surname:	
T.R. Identification No¹:	
Representative's T.R. Identification No²:	
Telephone Number:	

¹ Nationality, passport number and if any, identification number for foreign nationals

² Nationality, passport number and if any, identification number for foreign nationals

Address:	
E-mail Address:	

2. INFORMATION ON DATA CONTROLLER

My Relation with your Company	
<input type="checkbox"/> Customer Company Company and Position:.....	<input type="checkbox"/> Supplier Company Company and Position:.....
<input type="checkbox"/> Employee Department:	<input type="checkbox"/> Former Employee Years of Service:
<input type="checkbox"/> Prospective Employee Date :.....	<input type="checkbox"/> This Person Company's Employee Company and Position:.....
<input type="checkbox"/> Customer.....	<input type="checkbox"/> Other:

3. MY REQUEST WITHIN THE SCOPE OF PERSONAL DATA PROTECTION LAW

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4. METHOD OF SENDING RESPONSE TO MY APPLICATION (*please specify only one method*)

- Please send to my address
- Please send to my e-mail address
- I would like to receive in person (*Notarized proxy letter or certificate of authorization is required in case of delivery in person.*)

5. MY STATEMENT AS DATA SUBJECT/ REPRESENTATIVE

I hereby represent and agree that I am legally authorized to make this application as Data Subject or authorized representative of the Data Subject, that the information and documents in the application are up-to-date and correct, and that I do not provide any illegal, inaccurate and misleading information.

I acknowledge that if I make an unauthorized application, upon my application, I may cause the information to be shared illegally or unfairly about personal data and therefore I will be responsible for the damages of your Company and the persons concerned.

Person Applying for and on behalf of Data Subject/ Other Person³

Name- Surname

:

Date of

Application :

Signature:

³Requests of persons acting in the name of the Data Subject should submit to the Company **a private proxy letter (notary certified)** that contains a provision on the relevant requests or actions in connection with Personal Data. Identification card and certified custodianship decision are required for those applying for children or persons under their custody.